

2009 Annual Report

Utah Department of Human Services
Child and Family Services



Gary Herbert, Governor
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This document was prepared by Utah's Division of Child and Family Services.

Additional copies of the report may be obtained from Child and Family Services at the following address:

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The children pictured throughout the annual report are youth featured in Utah's adoption Heart Gallery. The Heart Gallery is an event in which youth, who are orphans of the State, are photographed by professional photographers who generously donate their talents, materials, and time to capture the individual personality of each young person. The portraits then become part of a traveling exhibit designed to heighten awareness of the need to find families for our community's forgotten children – older youth and sibling groups without permanent families.

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Director's Message



Contained within the pages of this report, you will find the accomplishments of Child and Family Services for Fiscal Year 2009. And what a year it has been. This report is being provided to you on-line this year to save on the costs of printing. As you are aware, we are under budget pressures brought about by the down turn in the nation's economy. Although Utah has fared better than many states, it is obvious that we are not immune.

We continue to find ways to provide quality services to children and families. Our challenge has been and will continue to be ensuring safety, permanency and well-being for children who are impacted by abuse and neglect.

Additionally, we must be very vigilant that services are provided in such a way that they protect the very essential constitutional rights of families.

Our commitment to you, as citizens of the State of Utah, is to continue to provide these vital services while ensuring quality and accountability for our work. We do this in partnership with other agencies, organizations, and communities.

As always, we welcome your comments and feedback about the information contained in this report.

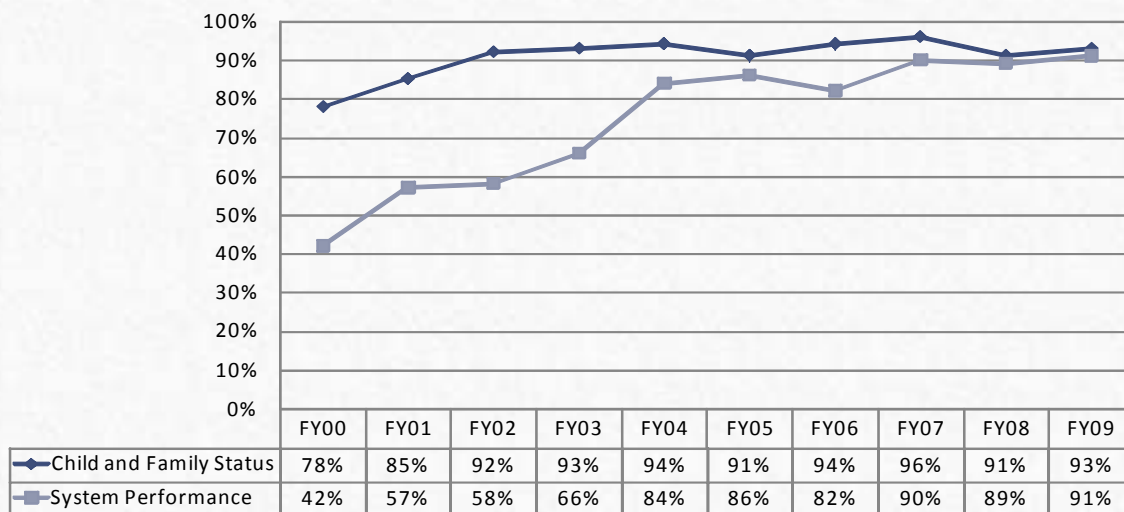
Sincerely,

Duane E. Betournay, M.P.A.
Director
Division of Child and Family Services

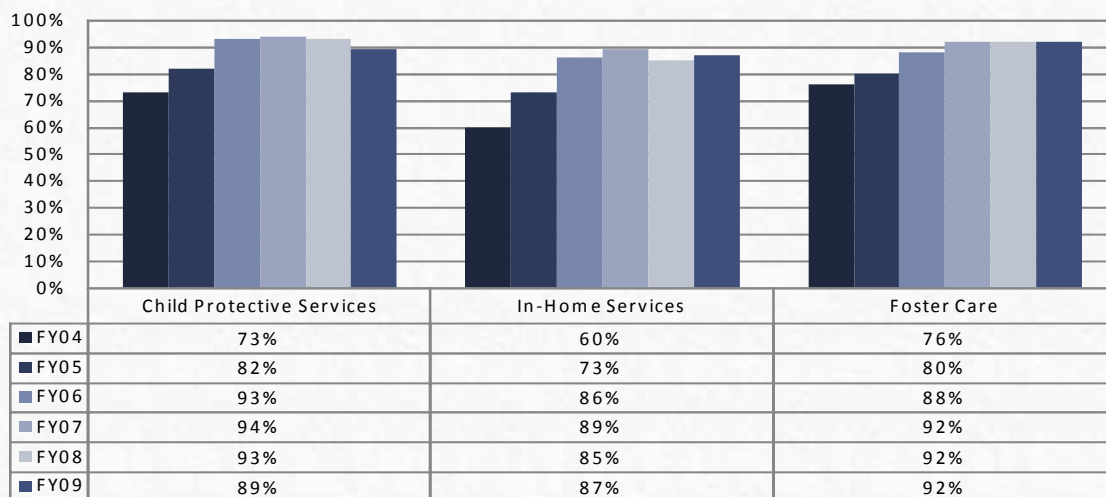


Below are two charts outlining the results of the reviews first implemented with the Performance Milestone Plan as a part of the David C. lawsuit. These reviews continue to be used to measure performance across program areas. The Qualitative Case Review (QCR) measures outcomes for children and families while the Case Process Review (CPR) measures compliance with Practice Guidelines.

QUALITATIVE CASE REVIEW PERFORMANCE



CASE PROCESS REVIEW PERFORMANCE

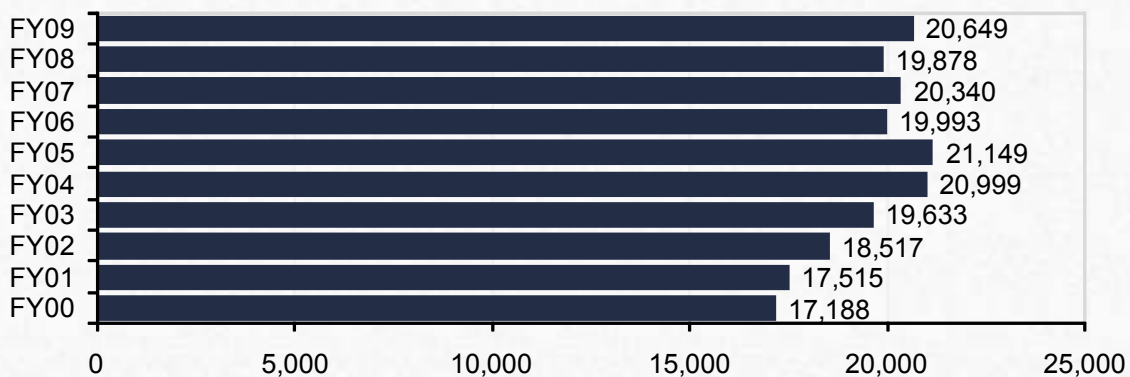


Child Protective Services

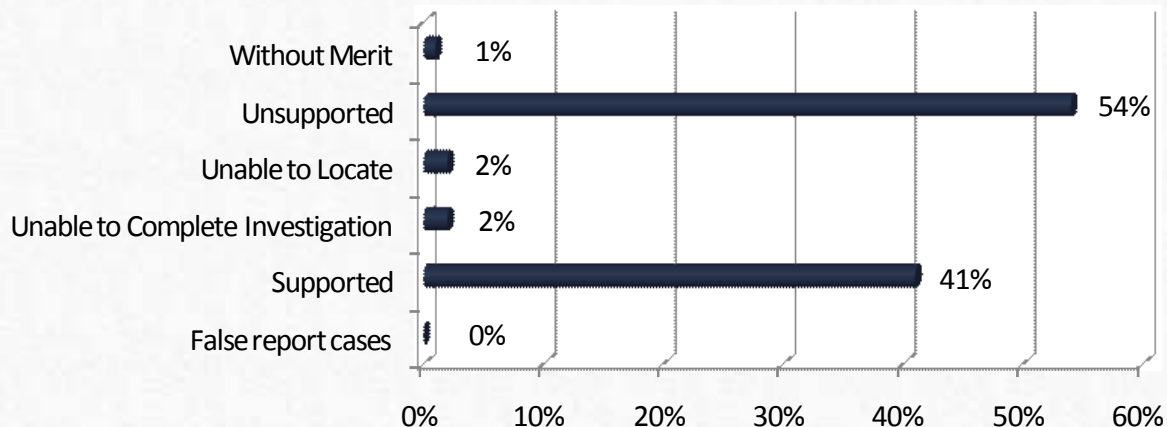
The Child Protective Services (CPS) program responds to calls from the community concerning potential abuse, neglect, or dependency of children. When CPS caseworkers respond to these concerns they assess the situation using the Safety Decision-Making Model. This model directs caseworkers to evaluate (1) threats of harm, which are specific and observable conditions in the child's environment, (2) child vulnerabilities, which is the degree to which a child is susceptible to the impacts of specific threats of harm, and (3) protective capacities, which consists of the characteristics or resources of the parent and/or caregiver that directly manage identified threats of harm or serious threats of harm. Based upon the information gathered as part of this assessment, a determination is made whether or not additional intervention is required to create safety. Interventions may include CPS caseworkers providing educational information, referring to community services, Child and Family Services' In-Home Services, or, if the child cannot be maintained safely in the home, placement into protective custody.

CPS investigated 20,649 cases in FY09. Of those 8,505 (41 percent) were supported.

NUMBER OF CPS CASES INVESTIGATED

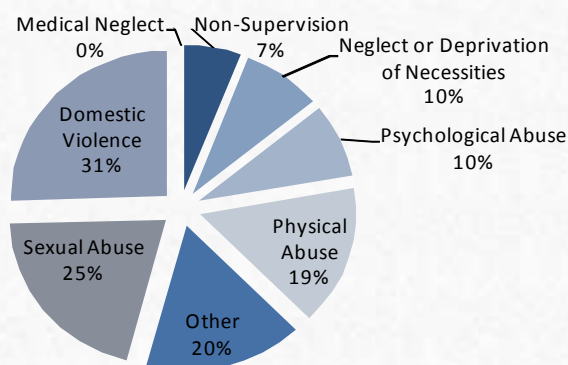


RESULTS OF INVESTIGATIONS



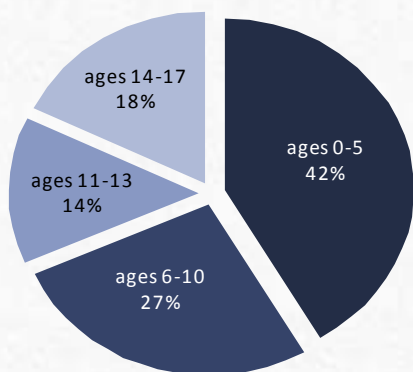
Domestic violence related child abuse (DVRCA) is the most frequently supported allegation. Sexual abuse is the second most supported allegation. The Other allegation category in the chart below includes allegations of safe relinquishment of a new born child, child endangerment, dependency, and failure to protect. For definitions of allegations see the Definitions section of Practice Guidelines at www.hspolicy.utah.gov/dcfcs. Note that one case may have more than one supported allegation; therefore, the percentages in the chart below add up to more than 100 percent. Additionally, 29 percent of supported abuse or neglect cases had alcohol or drug abuse as a contributing factor as reported by caseworkers, 1 percent less than last year.

PERCENT OF ALLEGATION TYPE FOR SUPPORTED CPS CASES

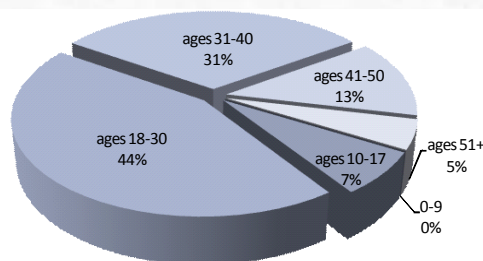


Of the total abused and neglected children in FY09, 54 percent were female and 46 percent were male. Children aged zero to five years comprise 42 percent of all supported victims, and adults aged 18 to 30 years comprise 44 percent of supported perpetrators. Approximately 69 percent of perpetrators are the victim's parents, and 19 percent are other relatives.

VICTIMS BY AGE

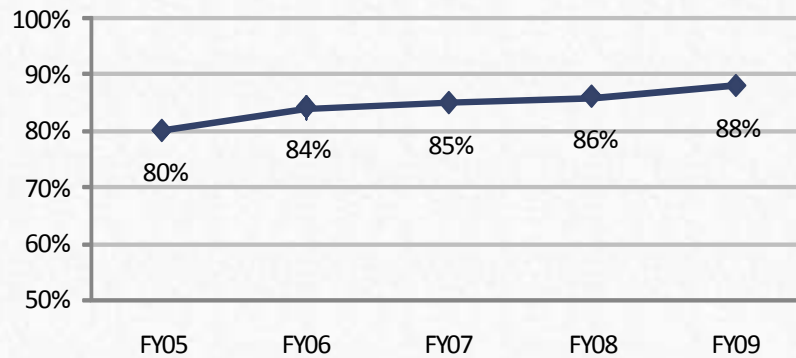


PERPETRATORS BY AGE



The chart below shows the percentage of CPS investigations where the child was seen by the caseworker within the priority timeframe required. Cases are given a priority by the intake worker depending upon the perceived safety risk to the child. Priority 3 cases must be seen within three working days of receiving the case, priority 2 cases must be seen within 24 hours of receipt, and priority 1 cases must be seen within one hour (or three hours if in a rural area where distance is a factor).

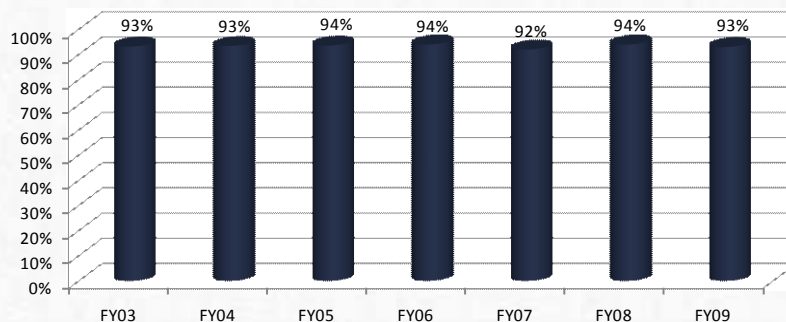
TIMELINESS OF INVESTIGATION



Outcomes

There were 12,676 supported victims on the 8,505 supported cases. Child and Family Services hopes to minimize any subsequent abuse or neglect children experience by providing education, referrals, or services as the result of a CPS intervention. Of the supported cases, 80 percent of the families were referred to the community for services. Of the supported victims, 15 percent received subsequent In-Home Services, and 11 percent received subsequent foster care services from Child and Family Services. The chart below shows the supported victims that did not experience a second supported abuse or neglect incident within six months.

PERCENT OF SUPPORTED VICTIMS WHO DO NOT EXPERIENCE REPEAT MALTREATMENT WITHIN SIX MONTHS



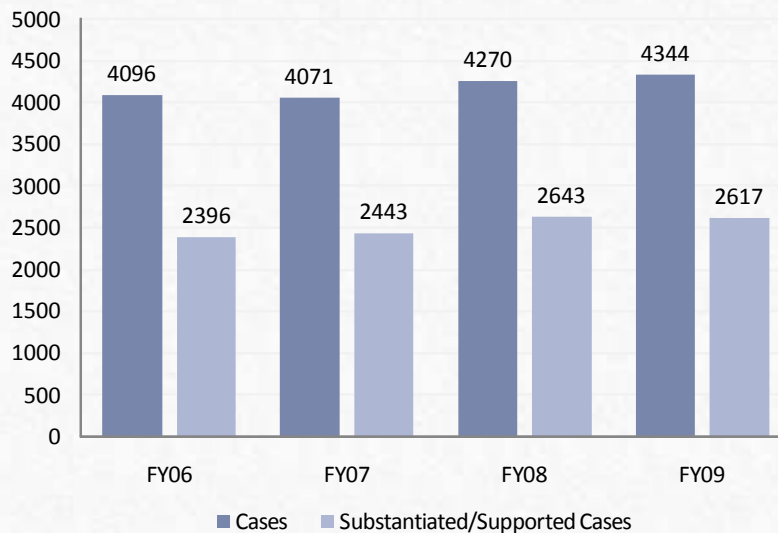
Initiatives

Work has continued on implementing the Safety Model into all aspects of Child and Family Services. Over the last year a workgroup has met to consider how this can be done effectively. The workgroup includes community partners and allied agencies such as the courts and Attorney General's office. In the coming year plans to purchase a model that is used in 22 other states with success will be finalized.

Domestic Violence Related Child Abuse

Utah is one of only five states that recognizes domestic violence in the presence of a child as child abuse. This acknowledges the damage that can occur when children are exposed to family and domestic violence. When a domestic violence situation occurs where a child is present, law enforcement is required to contact CPS and report an allegation of DVRCA. Calls may come from the community as well. An allegation may be supported when it meets requirements under the law that the abuse has taken place. In cases where domestic violence is an issue but not enough to open an investigation such as when a child is not present, Child and Family Services may provide referrals to community resources. DVRCA is the most frequently supported child abuse allegation. Approximately 31 percent of all victims of supported CPS investigations in FY09 included incidents of domestic violence. The chart at the top of page 7 shows the number of CPS cases that include an allegation of domestic violence in the presence of a child and those cases where the allegations were supported.

DOMESTIC VIOLENCE RELATED CHILD ABUSE CASES



Domestic Violence Shelters

Child and Family Services is responsible for the distribution of Federal and State resources to Domestic Violence Shelters. Child and Family Services also provides direct intervention to families experiencing challenges associated with allegations of domestic violence.

Fifteen shelters statewide contract with DCFS to provide services to victims of domestic violence.

Clients may stay in a shelter for multiple types of abuse including:

- threats of violence
- verbal abuse
- psychological abuse
- physical violence

Shelters provide some or all of the following services to men, women, and children:

- casework
- safety planning
- group counseling and support groups
- community resource education
- referrals for employment
- mental health, health care, and legal services
- perpetrator treatment referrals
- assistance in acquiring protective orders

During FY09, shelters accepted 30,624 calls.

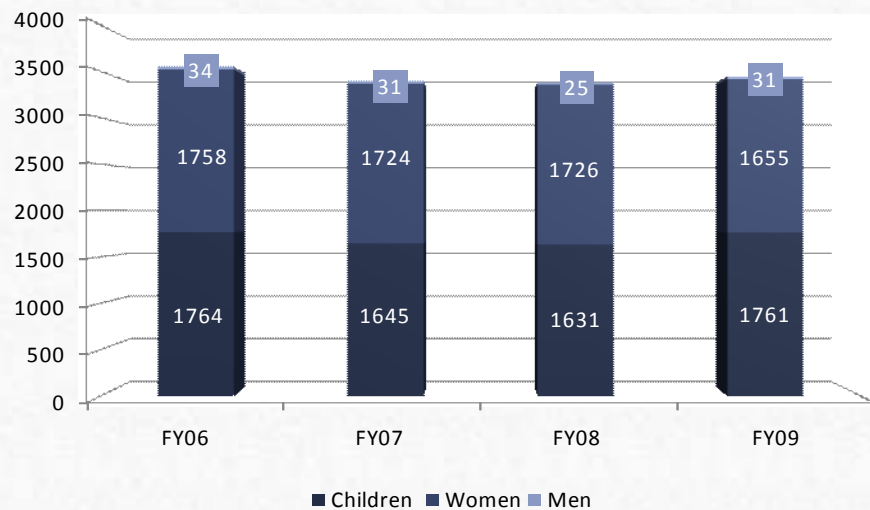
They may access shelters directly via community services, as a result of a crisis call, from law enforcement or from medical staff. These children and families may also be referred to a shelter because of a CPS investigation.

The data collected on domestic violence shelter clients are not identified due to federal restrictions. Because clients may enter the same shelter or different shelters during the time period, the client counts are considered duplicated (the same person may be counted more than once).



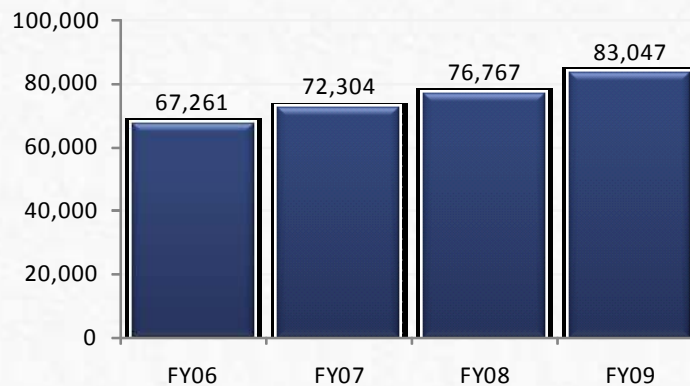
The data in the chart at the top of the next page represent domestic violence victims (men, women and children) who entered a domestic violence shelter and whose shelter episode closed during FY09. Children usually enter the shelter with their adult parent who is identified as the primary client. In FY09, approximately 50 percent of the episodes included one or more children. In addition, about 41 percent of the primary clients were in the 18 to 30 year old age group.

NUMBER OF DOMESTIC VIOLENCE VICTIMS SERVED BY SHELTERS



The data in the chart below represents the total number of days clients (men, women, and children) stayed in one of the 15 shelters statewide during the fiscal year. The number of days are calculated using the start and end dates of each shelter episode for each person.

SHELTER DAYS PROVIDED



Outcomes

Because the information collected are not identified due to Federal restrictions, we are unable to track outcomes on the clients served by domestic violence shelters.

Initiatives

Continued socioeconomic challenges impact domestic violence in unique ways. There is often a correlation between the frequency and severity of domestic violence cases and downturns in the economy. Ongoing efforts will be made to protect funding for shelters and provide quality services for families struggling with domestic violence.

In addition, a primary initiative for the year will be an exploration of current funding formulas for domestic violence shelters across the state. Shelter directors, Child and Family Services staff, and community partners will be involved in the process.

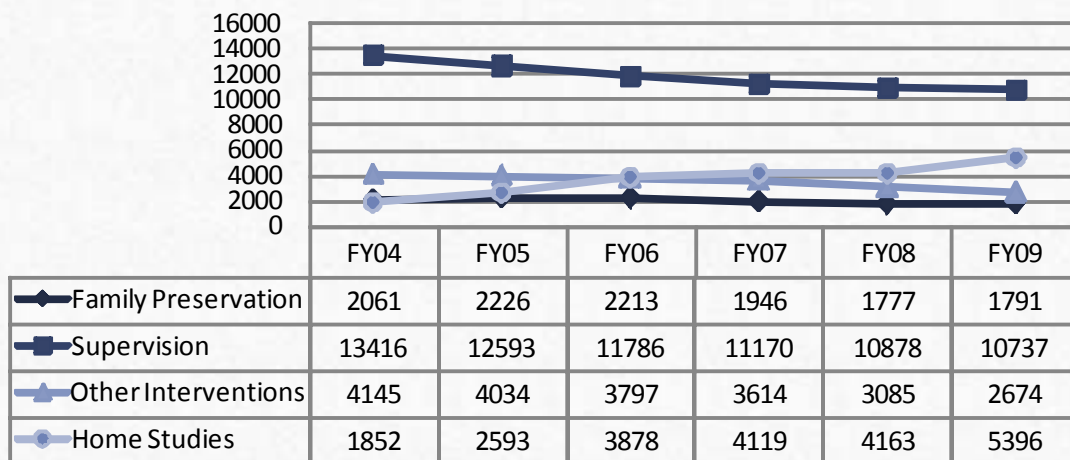
In-Home Services

In-Home Services are provided in the family's home. These services are designed to reduce threats of harm to the children and increase the protective capacities of the caregivers. In-Home Services are typically provided to families after an allegation of child abuse or neglect is supported and may be used to prevent a child from being removed from the home. In-Home Services are also used to increase family functioning as a child is reunified with his or her family after a foster care placement. In-Home Services may include counseling, advocacy, peer parenting, parent education, and parenting skills building. These services may be voluntary or court ordered. The intensity of the services delivered is dependent on the need of the family.

The chart below shows the number of adult and child clients served through various types of In-Home Services. Family Preservation Services are services available to families that are in crisis and are in need of more intensive services to help safely maintain a child at serious risk of being removed from his/her home or from the home of a relative with legal custody. A caseworker is available to the family 24 hours a day. The intervention typically lasts from 60 to 90 days. Supervision Services are less intensive home-based services where abuse or neglect is a concern. Other interventions may include counseling or home-based interventions where abuse/neglect is not a concern. Home studies may be court-ordered prior to providing services, or prior to placing a child with a prospective caregiver.

The data below represent the number of child and adult clients served during the identified time period.

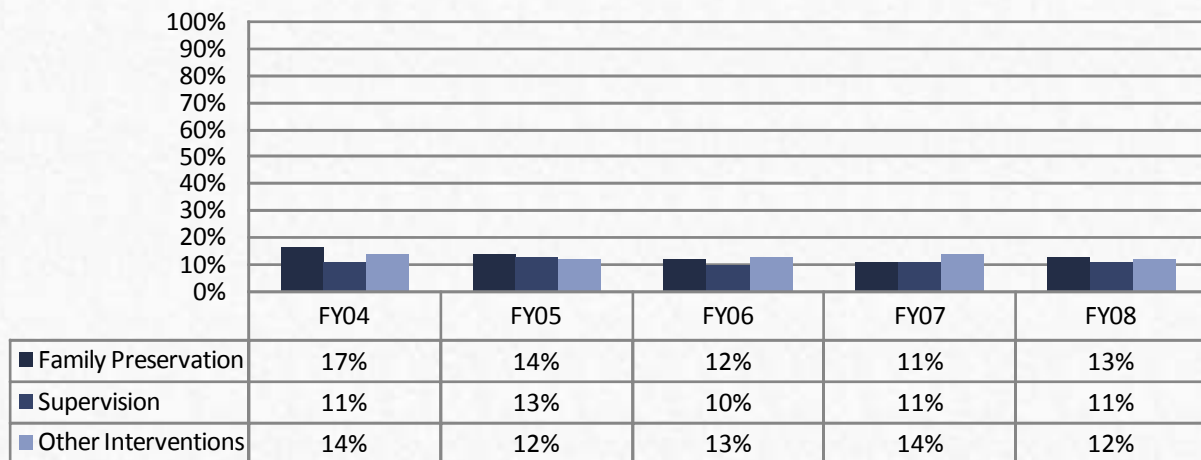
IN-HOME ADULT AND CHILD CLIENTS SERVED



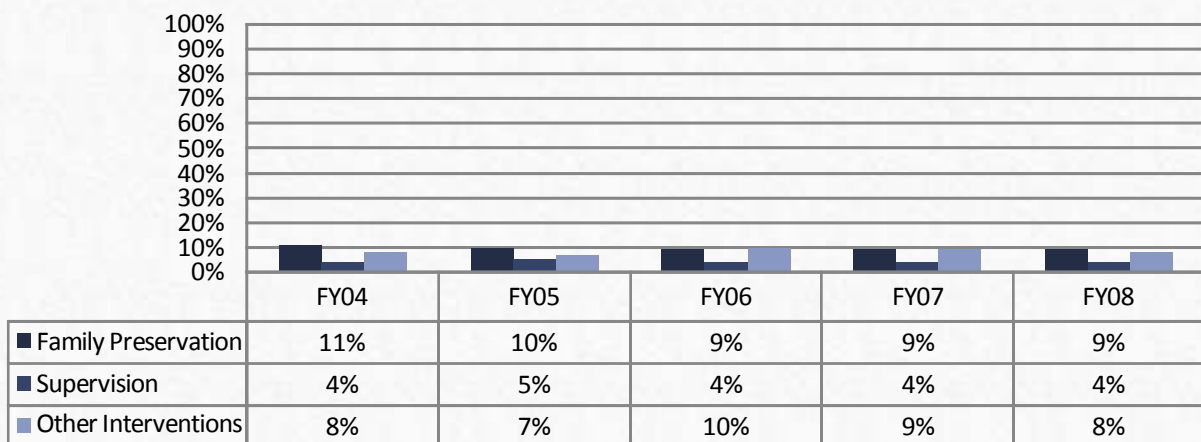
Outcomes

These data show child clients served in In-Home Services cases that closed during the fiscal year and had a supported CPS allegation or foster care case within the subsequent 12 months. Because we are tracking children for 12 months the most recent timeframe we can report on is FY08.

PERCENT OF CHILDREN WHO EXITED AN IN-HOME SERVICES CASE WHO SUBSEQUENTLY HAVE A SUPPORTED CPS CASE WITHIN 12 MONTHS



PERCENT OF CHILDREN WHO EXITED AN IN-HOME SERVICES CASE WHO SUBSEQUENTLY HAVE A FOSTER CARE CASE WITHIN 12 MONTHS



Initiatives

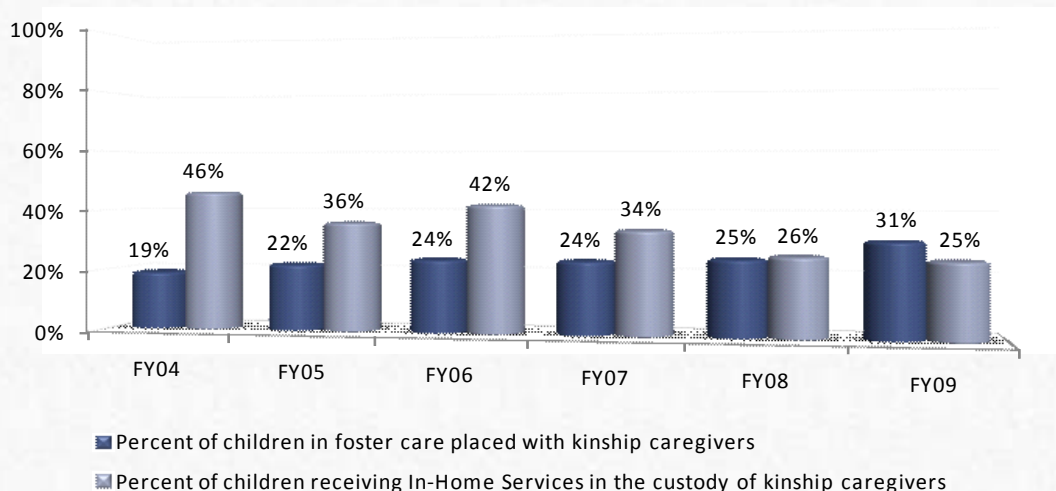
In-Home Services is one of the major initiatives for Child and Family Services this year. We are working on selecting a model for In-Home Services that will be used consistently across the state. We have partnered with Casey Family Programs and with the Mountains and Plains Child Welfare Implementation Center to help us select a model and then implement it. One of the models we are considering is the Systems of Care model that has been successful in the Eastern Region. This model engages community partners in creative ways to support families in need and help children. One of the goals for Child and Family Services is to significantly reduce the number of children in foster care. Strengthening our In-Home Services is one of the milestones in meeting this goal.

Kinship Services

Child and Family Services' first priority is to maintain children at home with their family, if they are able to do so safely. If a child cannot safely remain at home the next best option is placement in the home of someone familiar – a kinship caregiver. Kinship caregivers are preferred placements for children due to their knowledge of and relationship with the family and child. Because of their personal attachment to the child, kinship caregivers are generally willing to provide a permanent home for children who are unable to return home.

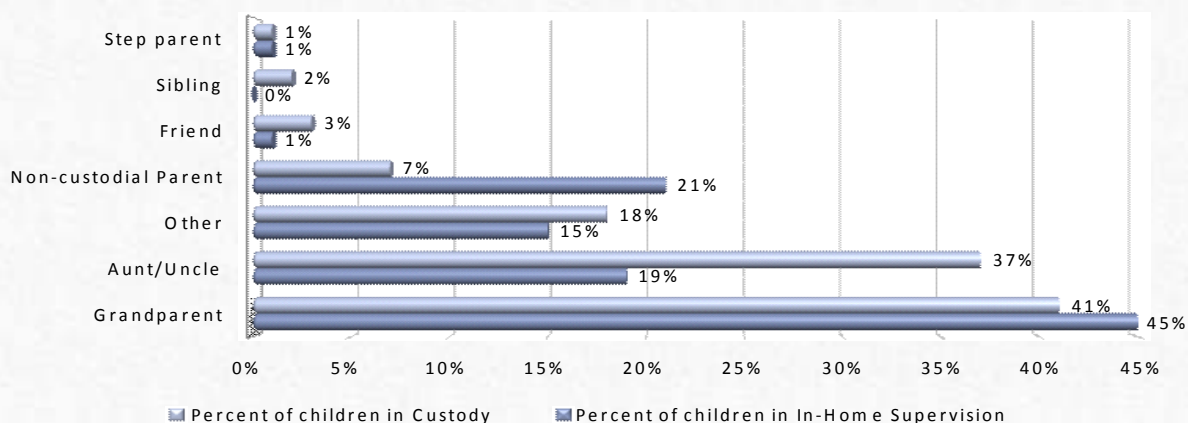
When kinship caregivers are identified, Child and Family Services will conduct an assessment to determine the ability and willingness of the kinship caregivers to promote safety, well-being, stability, and permanency for the child. When children are placed with a kinship caregiver the relative can become a licensed foster care provider in order to get extra supports and services and custody of the child remains with the State (i.e., the child remains in foster care). Custody can also be given to the relative with the court often ordering Child and Family Services' In-Home Services. Child and Family Services encourages kinship caregivers to become licensed foster parents so they will have the extra supports they need as they begin to care for the child. The graph below shows the percent of children served in In-Home Services that are placed with kin and the percent of foster care children that are placed with kin. More kinship caregivers are choosing to become licensed foster parents for a time.

PERCENT OF CHILDREN IN FOSTER CARE PLACED WITH KINSHIP CAREGIVERS AND PERCENT OF CHILDREN RECEIVING IN-HOME SERVICES IN THE CUSTODY OF A KINSHIP CAREGIVER



Kinship caregivers may be a child's grandparents, aunts, uncles, brothers-in-law, sisters-in-law, stepparents, first cousins, stepsiblings, or siblings. For an Indian child, relatives are defined by the Indian Child Welfare Act. Grandparents are the kinship caregivers that children are most frequently placed with, followed by aunts and uncles.

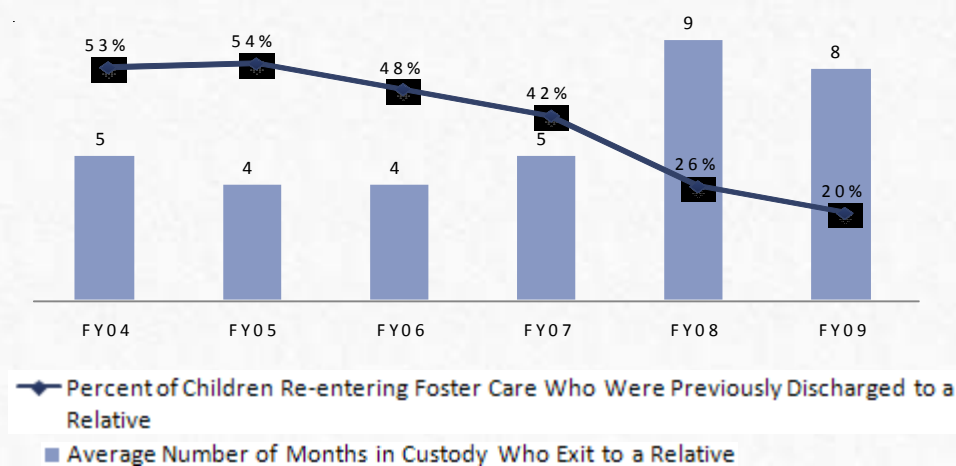
RELATIONSHIP OF KINSHIP CAREGIVER TO THE CHILD FOR CHILDREN IN FOSTER CARE AND CHILDREN SERVED THROUGH KINSHIP IN-HOME SERVICES



Outcomes

Child and Family Services has been working to reduce the number of children who are discharged from foster care into the custody of relatives that later re enter foster care. The strategy has been to spend more time at the beginning of the foster care case working with the kin, ensuring that they had the services and supports they needed to care for the child, and helping them understand the long-term commitment they were being asked to make. Because of this initiative, children spent slightly longer amounts of time in custody the last two years, however, more children achieved lasting stability as can be seen by the reduction in the rate of children re entering custody within 12 months from kinship caregivers.

PERCENT OF CHILDREN PLACED WITH RELATIVES WHO RE ENTER FOSTER CARE WITHIN 12 MONTHS OF EXIT AND AVERAGE NUMBER OF MONTHS IN CARE



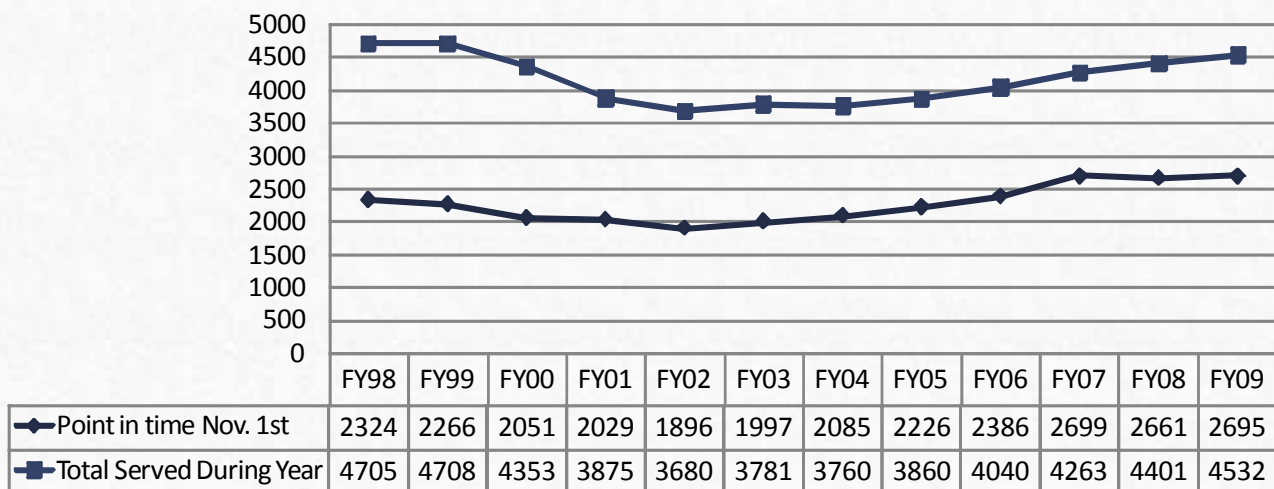
Initiatives

During the coming year, changes in SAFE will allow for better tracking of custody and placements with kinship families that are served through in-home services. We are also working with the Department of Workforce Services to streamline the process for relatives to obtain Specified Relative grants and Medical Assistance (Medicaid card) to help with the expense of caring for a child. We are also working with the Office of Licensing to expedite the licensing process for kinship caregivers to become foster parents and receive the support that is available through that program.

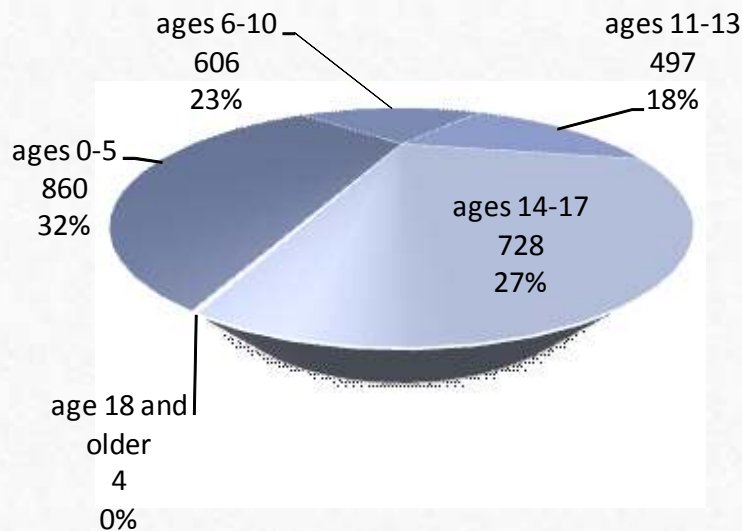
Foster Care Services

When a child is unable to remain safely in the home of their parent or caregiver, juvenile court may order custody and/or guardianship of the child to Child and Family Services, which is commonly referred to as “foster care.” The purpose of foster care is to provide a safe environment where the child can reside while services are provided to the child and family. If the child is unable to return to a parent or caregiver, Child and Family Services focuses on building connections for the child with another family that will be their permanent home. Permanency for the child can be achieved through guardianship with a relative or adoption.

NUMBER OF YOUTH RECEIVING FOSTER CARE SERVICES POINT-IN-TIME AND TOTAL SERVED

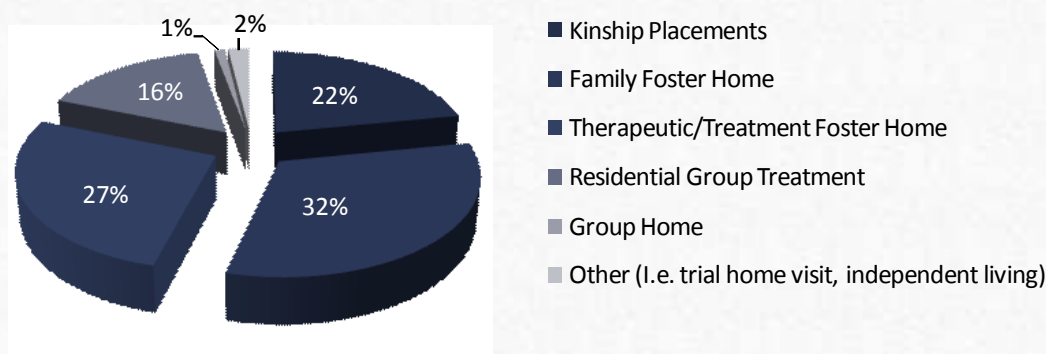


PERCENT AND TOTAL NUMBER OF CHILDREN IN FOSTER CARE POINT-IN-TIME 11-1-09 BY AGE GROUP



When children are placed in foster care efforts are made to place them in the least restrictive placement that meets their needs. The chart below shows the placement structure of children in custody.

PLACEMENT TYPES OF CHILDREN IN FOSTER CARE



Once children are placed into custody for their safety, the goal of Child and Family Services becomes reunifying the child with their parents, or if that is not possible placement in another permanent home. Child and Family Services attempts to balance finding a permanent placement quickly, with reducing the likelihood that the child will re-enter custody. The chart below shows the disposition of children at the close of foster care cases in the past year and the length of time, on average, they were in custody.

Reason for Exiting	Percent	Average Months in Custody
Reunification with Parent(s)/ Primary Caregiver(s)	44%	10
Adoption Final	25%	18
Custody and Guardianship to Relative	14%	8
Age of Majority/ Emancipation	11%	43
Child Ran Away	2%	26
Custody to Juvenile Justice Services	2%	16
Custody/Guardianship to Foster Parent/Other Nonrelative	2%	33
Referred Outside Organization	1%	23
Death of Child	0%	17

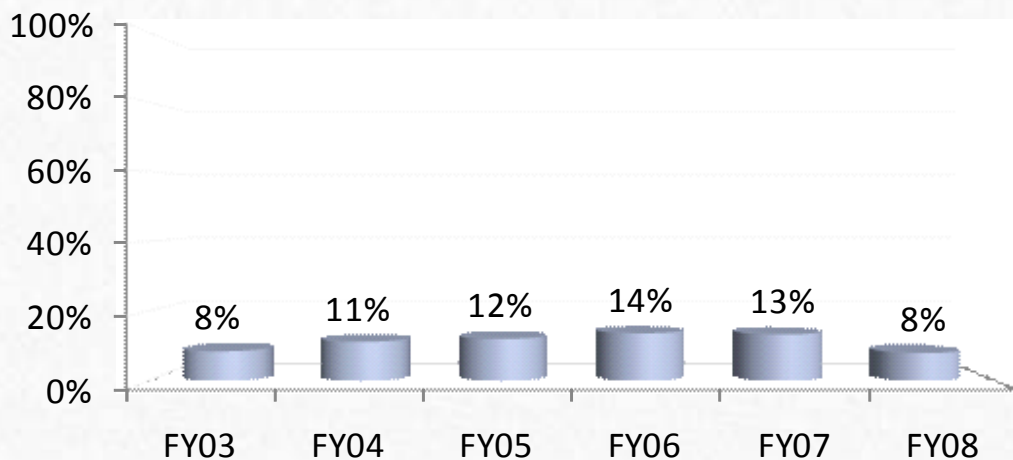
One of the goals within the foster care program is for children to experience as few placements as necessary to meet their needs. For optimal development it is essential for children to have stability in their living situation. In FY09, 79 percent of children in care less that 12 months had two or fewer placements, 8 percent more than last year. For children exiting custody during FY09, the average number of placements children experience while in custody was three.



Outcomes

Permanency for children is one of the main goals of Child and Family Services. When a child is discharged from foster care the hope is that this will be a long-term stable home for the child. Child and Family Services works to minimize children having to re-enter foster care.

PERCENT OF CHILDREN EXITING CUSTODY WITH A SUBSEQUENT FOSTER CARE EPISODE
WITHIN 12 MONTHS



Initiatives

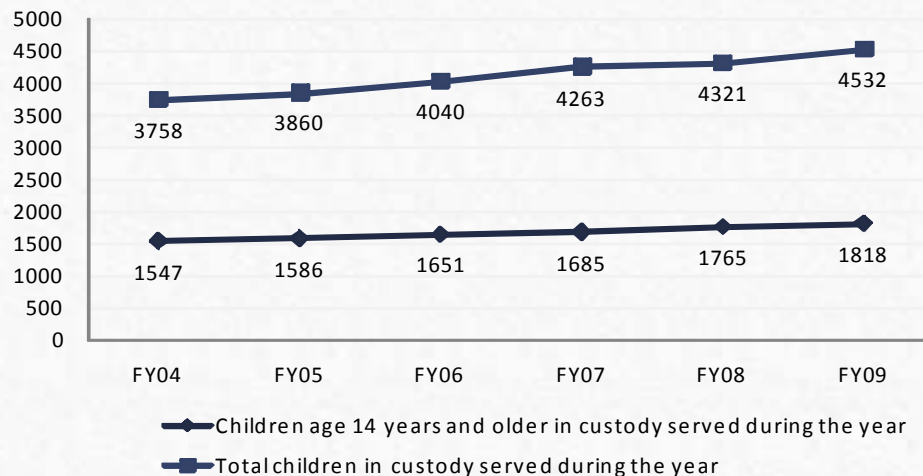
Over the next year Child and Family Services will continue to work on improving educational outcomes for children in foster care. Currently we are working closely with the school districts in Utah to implement new Federal and subsequent State laws that allow children in foster care to remain at the school they were attending when they entered care. It prioritizes placement with a caregiver who will facilitate this if it is determined to be in the child's best interest. Another major issue for the foster care program is the Medicaid restructuring. The changes to Medicaid necessitate sweeping changes to the way we facilitate placement of all foster children at all levels of care. The changes will most acutely affect the placements made at higher levels of care. This means that there will be fewer placement options available for children with more difficult emotional and behavioral problems. We are working closely with providers that we contract with to change existing programs so that Medicaid dollars are still available for children who need these intensive services. We are also working to strengthen and increase the skills of our foster families who are willing to work with the more difficult issues that some children exhibit, with the goal of having the ability to keep children in a family setting while they are undergoing treatment. The training curriculum for Level III placements is also being updated in order to increase training and recruitment for families at that level of care. The new In-Home Services model will be an important component in this process. Work will also continue to be done on the Peer Parent program, updating the curriculum and expanding the program in each region in order to provide this service as a "wraparound" for families to help them successfully parent.

Child and Family Services will also continue to work on ways to improve how we provide permanency for the children we serve. Permanency includes providing a safe and stable home, promoting enduring relationships that will provide stability and familiarity to the child, and assisting the child in maintaining a connection to their identity. Initiatives in this area include developing training for staff and partners as well as raising awareness about the importance of permanency in the lives of all the children we serve.

Transition to Adult Living Services

Transition to Adult Living (TAL) is a continuum of services and supports provided to all young people age 14 years and older in the care of Child and Family Services. Youth are offered TAL services regardless of their permanency goal. TAL services prepare young people to meet the challenges of transitioning to adulthood in accordance with Federal Chafee Foster Care Independence Program requirements. The chart below shows the number of youth served in foster care that were 14 years and older. Although the number of children continues to increase, the percentage of children served that are 14 years and older has remained consistent at 40-41 percent of all children in foster care.

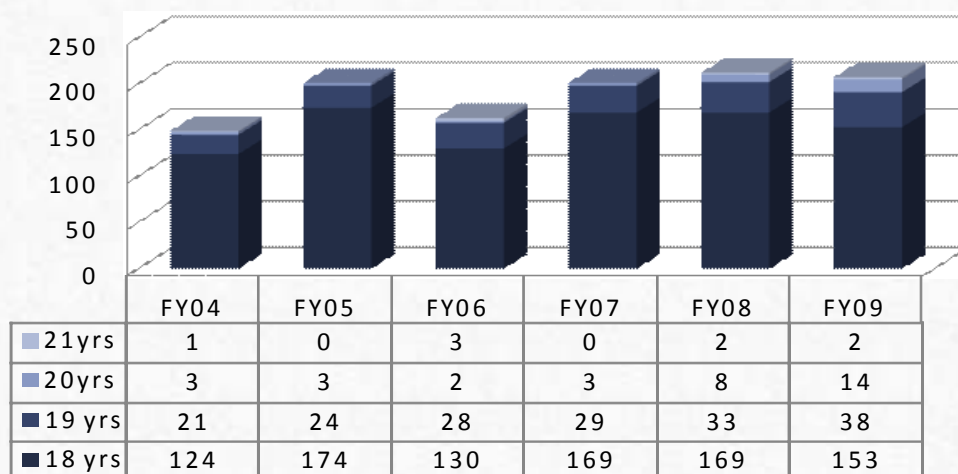
TOTAL NUMBER OF CHILDREN IN FOSTER CARE AND NUMBER AND PERCENT OF CHILDREN AGE 14 YEARS AND OLDER IN FOSTER CARE



TAL services are aimed at helping youth in foster care to achieve in five fundamental areas of adult life: supportive and enduring relationships, positive sense of self, educational attainment and stable employment, health care access, and safe and affordable housing. Basic living skills training is offered to each youth in care when they reach age 16 years. TAL services continue after young people exit care through the Young Adult Resource Network (YARN). The YARN provides resources that support youth in the areas of information and referral, personal support during transition, help establishing and maintaining living arrangements, providing peer support opportunities, and temporary financial assistance. The graph below shows the number of youth who are released from State custody because they have reached adulthood. Youth can remain in foster care up to age 21 years but most leave soon after their 18th birthday or high school graduation. Emancipation from Child and Family Services custody occurs when a child 18 years or older is released from the custody of the State or any other guardian.



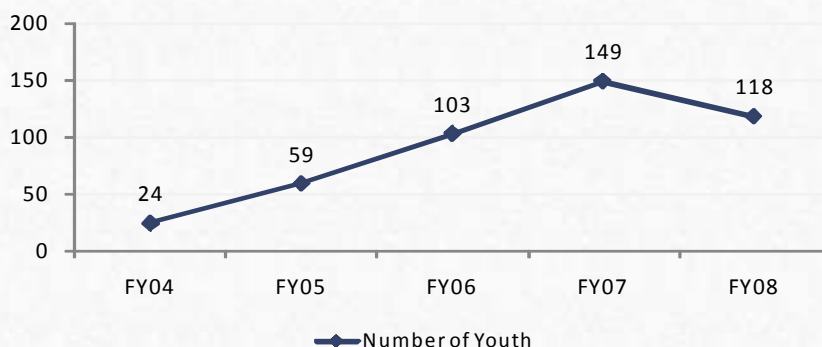
YOUTH EMANCIPATING FROM FOSTER CARE BY AGE



Outcomes

The goals for the TAL program are to help youth succeed in the five fundamental aspects of adult life. It is often difficult to locate children after they have left custody in order to assess outcomes. We will be working to implement an ongoing system to gather these data, see initiatives below. One outcome Child and Family Services regularly track is the receipt of Education and Training Vouchers by youth who have exited custody.

NUMBER OF YOUTH RECEIVING EDUCATION AND TRAINING VOUCHERS



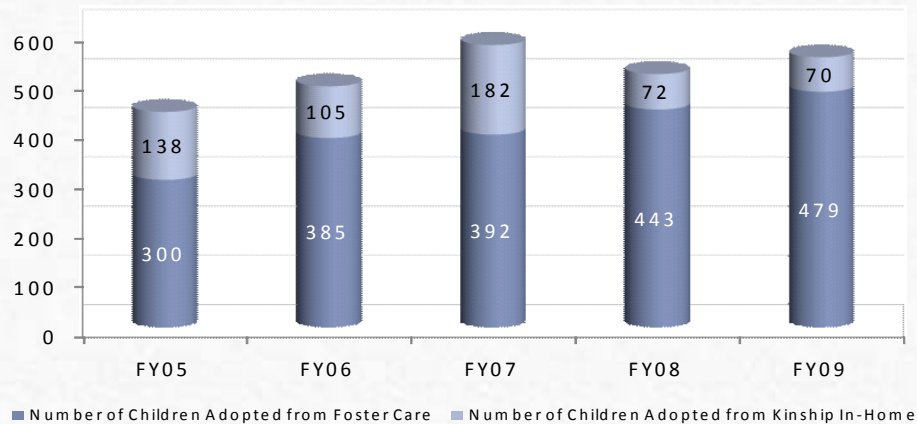
Initiatives

The TAL program has several initiatives for the coming year. This year we will be finalizing preparations for the National Youth Transition Database (NYTD) project. This is a Federal project that will be put in place to better track TAL services delivered while children are in care, as well as their status after leaving care. Child and Family Services has been working to modify their management information system to better track TAL services as well as to develop a mechanism to survey children at 17, 19 and 21 yrstd regarding their status. Additionally, strategies are being established to improve connections with youth once they leave care including using email, social networking, and texting.

Adoption Services

Child and Family Services strives to assure that all children have the opportunity to grow up in permanent families; families that will provide safety, guidance, and nurturing. If a child cannot be safely raised by their biological parents, every effort is made to find a relative to parent the child. If a relative is not available, preference is given to the child's foster family. Children may be adopted by relatives who receive services through In-Home services. They may also be adopted from foster care. The chart below shows adoptions from each of these service types.

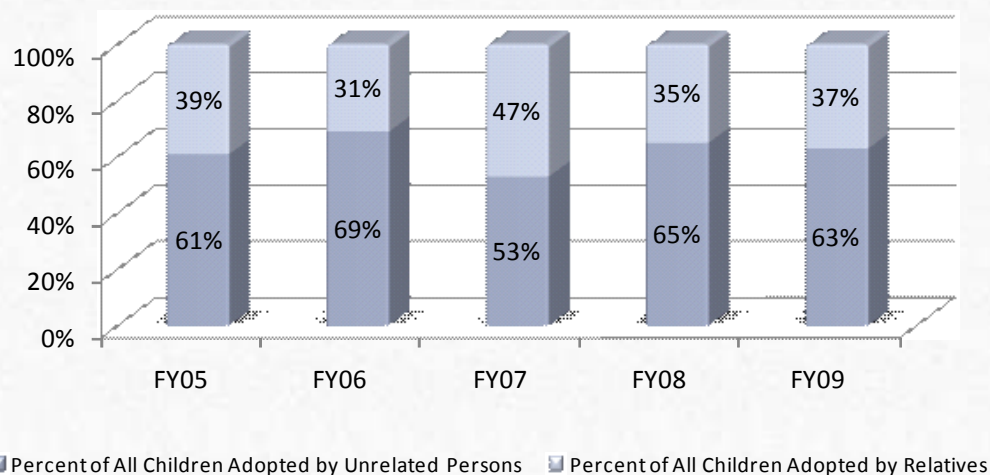
NUMBER OF CHILDREN ADOPTED FROM FOSTER CARE SERVICES
AND KINSHIP IN-HOME SERVICES



Child and Family Services offers supportive services for families who adopt older youth or children with special needs. Post adoption caseworkers specialize in adoption related issues and resources. Community services are listed through the Adoption Connection website, newsletter, and booklet. Medical assistance and financial support may be available for families who adopt children in foster care.

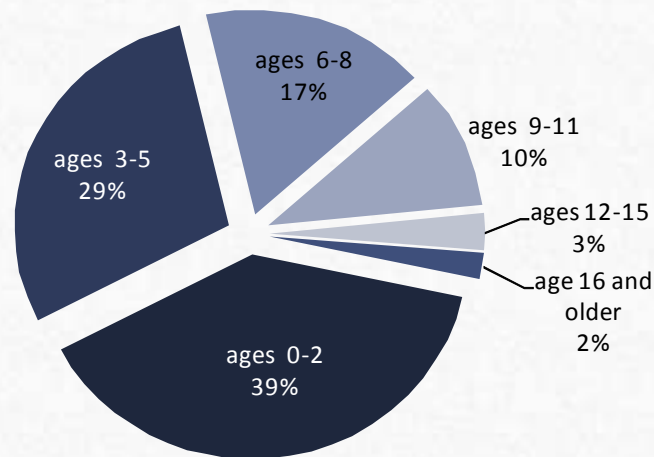
Nationally much attention has been placed on reducing the amount of time it takes children in foster care to be adopted. Utah is able to move children quickly to adoption when reunification efforts have been unsuccessful.

AVERAGE MONTHS CASES ARE OPEN PRIOR TO ADOPTION

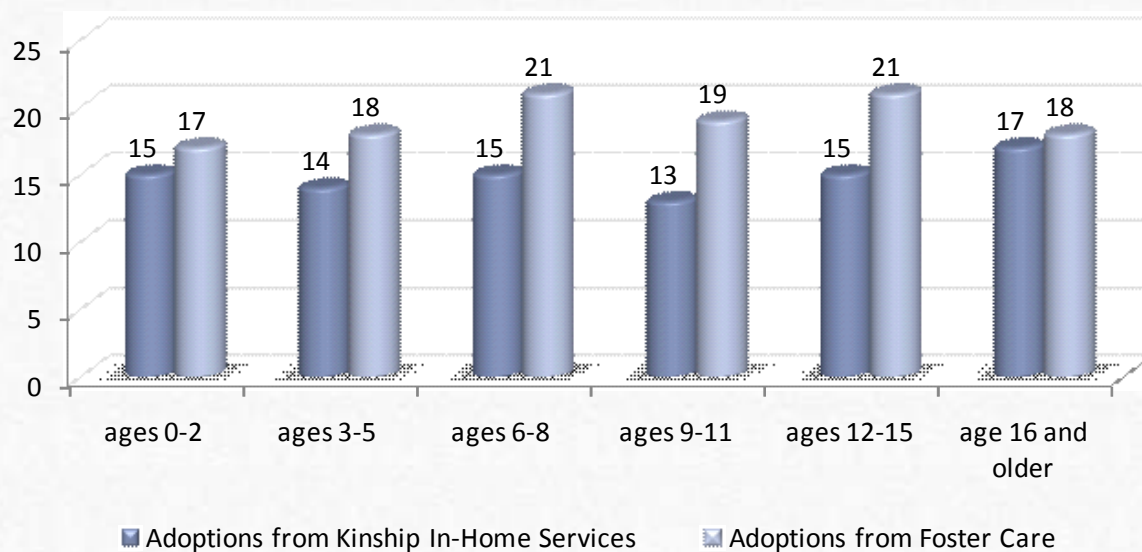


Children can be adopted at any age. Most adoptions in Utah are of children age zero to five years. Older youth and sibling groups often wait years in foster care for a family to call their own. Utah recruits adoptive families specifically for older youth through the Heart Gallery, Wednesday's Child, and other events. The Adoption Exchange sponsors the Heart Gallery and arranges locations to display the photographs in an effort to increase public awareness of Utah's children who wait for an adoptive family.

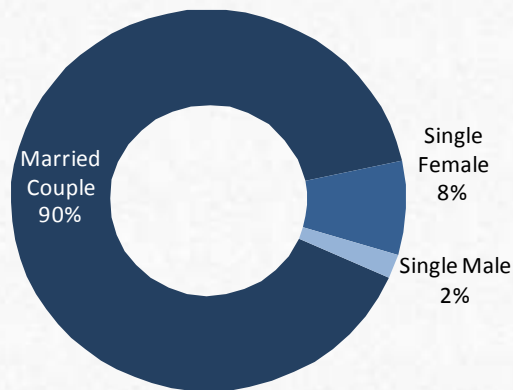
AGES OF CHILDREN ADOPTED FY09



AVERAGE MONTHS IN FOSTER CARE PRIOR TO ADOPTION BY AGE



STRUCTURE OF FAMILIES ADOPTING FROM FOSTER CARE



Outcomes

These data look at children who were adopted and received adoption assistance within the given fiscal year and came back into foster care at any time after their adoption. Thus the children adopted in FY05 could have come back into foster care within a five-year period. While the children adopted in FY08 only have one year to have re-entered foster care. Since FY05, 98% to almost 100% of adoptions have been successful.

NUMBER OF CHILDREN ADOPTED WHO RECEIVED STATE ADOPTION ASSISTANCE WHO CAME BACK INTO CUSTODY

FY05	FY06	FY07	FY08
11	8	11	1

Initiatives

This year Adoption Services will work with the Office of Licensing to select and implement a consistent homestudy to be used for kinship placements. This will lead to training for kinship staff on how to support kinship families through the homestudy process. Work will also be done in partnership with the Utah Foster Care Foundation on integrating brain regulation research into foster parent and staff training curriculum. A large part of the work this year will focus on the Medicaid restructuring. This will entail developing a “levels of care” model for Child and Family Services and coordinating with Juvenile Justice Services. One of the most important focuses for adoption services this year is permanency for older youth. One of the avenues for this is the Heart Gallery, which is explained on the inside cover of this report. The Heart Gallery photos are showcased throughout the report. Every child deserves a permanent family no matter their age.



Cultural Diversity

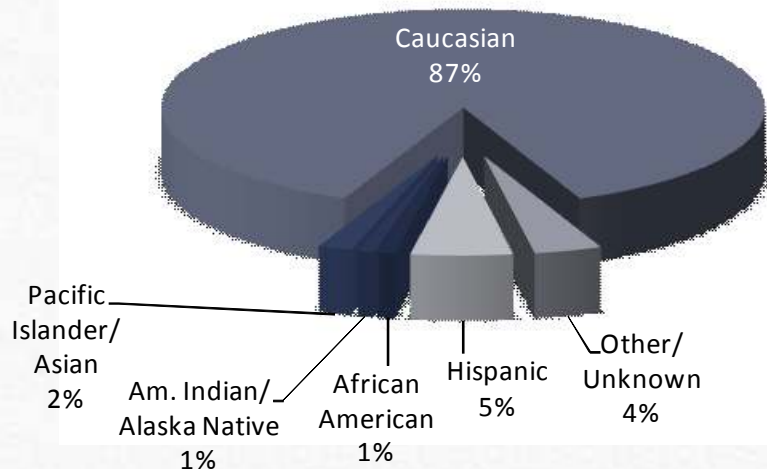
Child and Family Services caseworkers encounter families from many different ethnic backgrounds. One of the Practice Model Principles is to provide services that are culturally responsive, meaning that children and families are to be understood within the context of their own family rules, traditions, history, and culture. It is important for caseworkers to ask the family to share information that will help the caseworker understand the family's beliefs and values, and to respond with respect. The Indian Child Welfare Act is a Federal statute passed in 1978 by Congress to protect Indian families and preserve the ties between Indian children and their tribes. Child and Family Services is legally obligated to follow these standards and the inherent value of keeping children connected with their past, present, and future. Child and Family Services works to develop partnerships within the community to enhance our ability to provide culturally responsive services to families. Persons may be multi-ethnic and thus be represented in more than one category below. Nationally, several studies have been done to attempt to determine why some racial and ethnic minorities may be disproportionately represented in the child welfare system. Research suggests several community and agency factors that may contribute to this phenomenon.

Below are a table and a chart that show the percentages of race and ethnicity of clients served and foster care providers. Caucasian, African American, American Indian, Alaska Native, Pacific Islander, and Asian are categories of race while Hispanic is an ethnicity. Those who classify themselves as Hispanic will also indicate a race such as Caucasian or African American.

PERCENT OF CLIENTS SERVED BY RACE AND ETHNICITY

	Caucasian	Hispanic	African American	American Indian Alaska Native	Pacific Islander Asian	Other Unknown
Child Protective Services	90%	23%	5%	3%	3%	1%
In-Home Services	89%	18%	4%	3%	2%	1%
Foster Care Services	86%	25%	9%	7%	2%	0%
Adoption	64%	31%	5%	4%	0%	0%
Population	77%	16%	1%	1%	2%	3%

PERCENT OF FOSTER CARE PROVIDERS BY RACE AND ETHNICITY



Training

Child and Family Services provides an exceptional amount of training for the 1100 staff we employ. A small team of training staff located at the State Office in Salt Lake City has statewide responsibilities for research and curriculum development, to ensure that training is current and effective. This team has forged positive relationships with the schools of social work at the University of Utah and Utah State University. They also monitor staff compliance with Child and Family Services training requirements using a computerized system. Staff register for classes in our SAFE database system that is then able to create reports for supervisors and administrators as to the compliance for each individual employee. The statewide trainers also train the regional trainers as newly developed curricula is ready to be released. Each of the five Child and Family Services regions has a training manager and training staff.

In previous years, Child and Family Services has had a fairly high rate of employee turnover, which necessitated continually hiring and training new caseworkers. By its nature, child welfare is very complex. There are many laws, policies, processes, and best practices new staff need to understand before being given responsibility for their own caseload. New employees receive nearly nine weeks of CORE Practice Model training prior to assuming their own caseload. Assignment of cases is done on a very gradual basis and staff “shadow” other caseworkers and supervisors/mentors as they learn. Due to the economic circumstances of 2009, the Child and Family Services, for the first time, did not have a continual job announcement for new caseworkers. The retention of caseworkers was one positive outcome of this otherwise stressful year. The table below shows the number of new employees hired in each region and the percent of those trained.

Region	Employees Hired	Caseworkers Completing PM Training	Total Employees Completing Practice Model Training
Northern	11	100%	100%
Salt Lake	15	100%	100%
Western	7	100%	100%
Eastern	9	100%	78%
Southwest	4	100%	100%
Total (includes state office)	50	100%	92%

Caseworker, supervisory, and administrative staff are all required to receive 40 hours of training each year. Much of this training is provided in-house. In previous years, we have had a small amount of funding available to host statewide conferences and to allow some of our staff to attend conferences hosted by outside entities. Because of severely reduced funding this year most training was delivered through in-service classes. Support staff receives training pertinent to their job responsibilities.

The Casey Family Foundation graciously supported the costs for Child and Family Services to host a Supervisors' Conference in December. This allowed for supervisors from across the state to gather and learn and to be recognized for the significant role they play in ensuring that staff is well trained and prepared to serve children and families. Last year, 1007 employees received ongoing training delivered by Child and Family Services. Sixty-nine courses were taught. Some of the most frequently attended courses included Motivational Interviewing, Unlawful Harrassment, Domestic Violence, Long Term View Concept, Diversity Website, and Regional In-Service trainings.

Quality Improvement Committees

The purpose of Quality Improvement Committees is to ensure that Child and Family Services and the broader child welfare system in Utah have continual outside feedback to support system change and improvement. Citizens volunteer their time to serve on these committees.

There are nine Quality Improvement Committees across the state. The state committee looks at broader statewide issues while region committees focus on issues in the communities. The urban regions have one committee while the rural regions have more than one due to the geographical size of the region.

Quality Improvement Committees meet monthly to:

- Review trends and other relevant data
- Make recommendations for improvements
- Work on Qualitative Case Reviews (QCR) and Special Studies
- Address media and public relations issues
- Advocate for children, youth, families, and staff

ROLES OF COMMITTEE MEMBERS

SUPPORTER

Upon reviewing data regarding employee retention and morale, committee members may decide to recognize employees who are practicing at an exemplary level. Some committees have hosted luncheons where employees are honored and their efforts with clients are spotlighted.

ADVOCATE

When the committee has concluded that there needs to be a legislative change or additional funding, they may ask a member to speak at a legislative hearing, or to contact individual legislators to express concerns. Input from community members coupled with facts from Child and Family Services employees regarding legislative action can be a powerful tool in the change process. Legislators are particularly interested in hearing from constituents who are knowledgeable about issues.

PUBLIC AND MEDIA RELATIONS

One of the most important roles of the committees is to interact with the media and the public on issues relating to child welfare. For example, after studying an issue, a committee may conclude that broader public attention is needed. A reporter could be invited to the committee meeting, or some members might seek out an interview.

REVIEWER AND EDUCATED CRITIC

Committee members are encouraged to participate as reviewers in the QCRs that occur annually in each of the five regions. This is at least a two-day commitment, but is an excellent way to become much more “immersed” in understanding the casework dilemmas, complexities, and the practice Child and Family Services expects from our staff.

QUALITY IMPROVEMENT COMMITTEE ACCOMPLISHMENTS

Below are a few of the accomplishments highlighted by the committees at the Quality Improvement Summit.

In the **Northern region** the committee worked through a process that would allow a community-based agency to help search for kin for children in foster care.

In the **Southwest region** the committee has been working on a response to the proposed budget cuts as it relates to potential loss of services to clients.

In the **Eastern region**, the committee developed a matrix to give guidance to Child and Family Services staff when approving costly drug testing.

In the **Salt Lake Valley region** the committee did a survey about the quality of services in the TAL program.

In the **Western region** the committee created a mentoring program for children in foster care and developed a drug court video.

Several committees hosted employee recognition events.

QUALITY IMPROVEMENT COMMITTEE RECOMMENDATION PROCESS

Quality Improvement Committees continue to evolve and recommendations are coming from across the state about a variety of issues. This is a sign of positive growth. Once a committee completes their study of an issue for improvement, it must be determined if the recommendations pertain only to a region or whether the issue is of statewide concern. Many recommendations can be addressed within the region.

If the region does not have the ability and authority to proceed with implementing recommendations or if the recommendations require:

- Additional funding
- Legislative changes
- Practice Guideline changes
- Human Resource rule changes

These recommendations are sent to the region as well as to the state administration.

Once written recommendations are received, a region and/or state administration has 30 days to respond in writing. All recommendations and responses are posted on the Quality Improvement Committee website: utahqic.utah.gov

FUTURE FOCUS AREAS

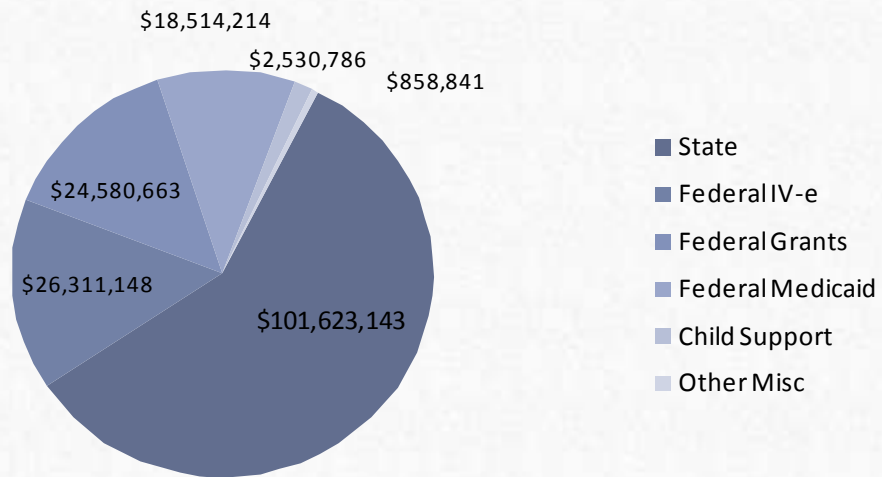
The state committee has established the following areas for focus in the upcoming year:

- Medicaid restructuring effects on services to youth in foster care
- In-Home Services program improvements
- Safety Model

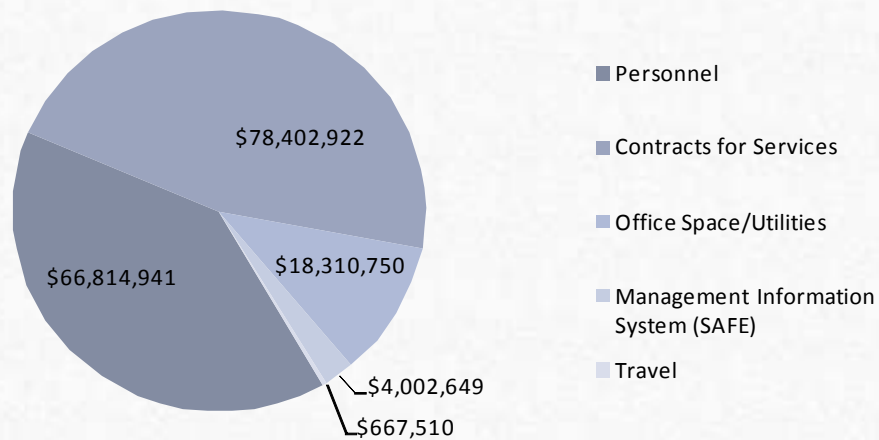


Funding

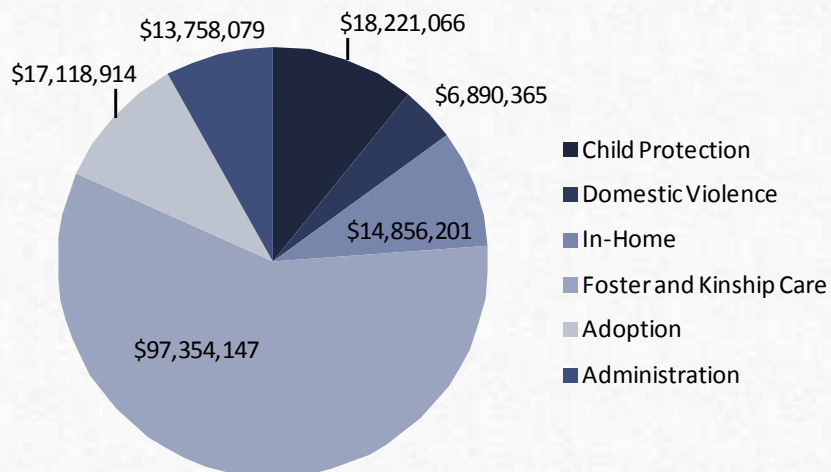
FUNDING SOURCES



HOW SPENT



SERVICES



FY09 Flexible Funding \$2,334,885

More Heart Gallery Pictures





